



DEPARTMENT OF HEALTH & MENTAL HYGIENE

MEDICAL CARE PROGRAM

COMPANION GUIDE FOR 820 PREMIUM PAYMENT VERSION 004010X061A1

May 19, 2003

Version 1

**EFFECTIVE FOR PREMIUM PAYMENTS ON OR AFTER
October 16, 2003**

Health Care Premium Payment 820

Introduction :

This Companion Guide contains a subset of the data content established for the Health Care Premium Payment (820). This transaction will be used to provide MCO capitation payment information.

This guide is not to be used as a substitution for the 820 Health Care Premium Payment Implementation Guide. The objective of the document is to clarify what information will be sent by Maryland Medicaid where multiple values exist and/or where specific values need to be identified.

All alpha characters will be in upper case. Data will be in ASCII format. Leading zeros for data elements such as Provider Number, Recipient ID, etc. will not be suppressed.

Gross Adjustments will be identified by using Gross as the First Name, Adjustments as the Last Name, and zeros in the Recipient Number.

This Companion Guide can be found on the State of Maryland Department of Health and Mental Hygiene Web site at

<http://www.dhmf.state.md.us/hipaa/transandcodesets.html>

Companion Guide - 820 PREMIUM PAYMENT

LEGEND:*SHADED rows represent "segments" in the X12N implementation guide**NON-SHADED rows represent "data elements" in the X12N implementation guide*

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
B.3		ISA	Interchange Control Header			
B.3		ISA01	Authorization Information Qualifier	00		
B.4		ISA03	Security Information Qualifier	00		
B.4		ISA05	Interchange ID Qualifier	ZZ		
B.4		ISA06	Interchange Sender ID			526002033MCP - Production 526002033MCPT - Test
B.4		ISA07	Interchange ID Qualifier			Agreed upon during trading partner set-up
B.5		ISA08	Interchange Receiver ID			Agreed upon during trading partner set-up
B.8		GS	Functional Group Header			
B.8		GS02	Application Sender's Code			MMISCPF
B.8		GS03	Application Receiver's Code			Agreed upon during trading partner set-up
B.9		GS08	Version/Release/Industry Identifier Code			004010X061A1
36		BPR	Financial Information			
36		BPR01	Transaction Handling Code	I		
36		BPR03	Credit/Debit Flag Code	C		
36		BPR04	Payment Method Code	CHK		
36		BPR16	Date			Check issue date
43		TRN	Reassociation Key			
43		TRN01	Trace Type Code	3		
43		TRN02	Reference Identification			Remittance Advice Number

48		REF	Premium Receiver's Identification Key			
48		REF01	Reference Identification Qualifier	14		
48		REF02	Reference Identification		30	Managed Care Org Trading Partner ID
56	1000A	N1	Premium Receiver's Name			
56	1000A	N103	Identification Code Qualifier	FI		
56	1000A	N104	Identification Code			Managed Care Org Tax- ID
62	1000B	N1	Premium Payer's Name			
62	1000B	N102	Name			MARYLAND MEDICAL CARE PROGRAM
62	1000B	N104	Identification Code			526002033
86	2000B	ENT	Individual Remittance			
86	2000B	ENT03	Identification Code Qualifier	ZZ		
86	2000B	ENT04	Identification Code			Recipient Identification Number
88	2100B	NM1	Individual Name			
88	2100B	NM108	Identification Code Qualifier	N		
88	2100B	NM109	Identification Code			Recipient Identification Number
91	2300B	RMR	Individual Premium Remittance Detail			
91	2300B	RMR01	Reference Identification Qualifier	AZ		
92	2300B	RMR02	Reference Identification			Recipient Identification Number
93	2300B	RMR05	Monetary Amount (Billed Premium Amount)			Not Used by Maryland Medicaid
96	2320B		Individual Premium Adjustment			Loop not used by Maryland Medicaid